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TRANSMITTAL FORM		Filing Date First Named Inventor		10/648,650 August 25, 2003 Marcus Andrew Stoodley 2161			
(to be used for all correspondence after initial filing) Total Number of Pages in This Submission		Examiner Name Attorney Docket Nu	mher	AMSBURY, WAYNE P			
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Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	D Li	rawing(s) censing-related Paper etition etition to Convert to a rovisional Application ower of Attorney, Rev hange of Correspond erminal Disclaimer equest for Refund D, Number of CD(s) Landscape Table	ers o vocation lence Ad	dress	Aft App of / App (Ap (Ap Pro State Off beloace Certificate	per Allowance Communication to TC peal Communication to Board appeals and Interferences peal Communication to TC peal Notice, Brief, Reply Brief) prietary Information tus Letter er Enclosure(s) (please Identify pos): of Mailing Express Mail (1 pg.) stcard (1 pg.)	
SIGNAT	URE OF	APPLICANT, A	TTORI	NEY. O	R AGENT		
Firm Name PELOQUIN, PLLC							
Signature Mark S. Peloguin, Cy. Mark S. Peloquin, Esq.							
Date October 2, 2006	Reg. No. 50,787						
I hereby certify that this correspondence is bei sufficient postage as first class mall in an enve the date shown below: Signature	ing facsimi		USPTO 0	or deposit	ed with the		
Typed or printed name Stephanie W. Robe	erts	1		-	Date	10/2/06	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Date October 2, 2006

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Fees pursuant to the Consolid			_ '	Application Numb	oer 10)/648,650	
FEE TR	AN5	MII I A	┕┖	Filing Date	Au	ugust 25, 2003	
Fo	r FY 20	06	L	First Named Inve	ntor M	arcus Andrew S	toodley
TA Auditor Addison and Lother Markey Con 27 OFF 4 27				Examiner Name	Al	MSBURY, WAY	NE P
Applicant claims small entity status. See 37 CFR 1.27			<u> </u>	Art Unit	21	2161	
TOTAL AMOUNT OF PAY	MENT (\$)	575.00		Attomey Docket I	No. 11	280.1002cip	
METHOD OF PAYMEN	T (check all t	that apply)					
Check Credit	Check Credit Card Money Order None Other (please identify):						
Deposit Account	Deposit Account f	Number:		Deposit Acco	ount Name):	
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Charge fee(s)) indicated belo	ow		Charge	fee(s) ind	licated below, exc	ept for the filing fee
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under 37 CFF under 37 cFF	R 1.16 and 1.1 s form may bec		ard infor			•	ovide credit card
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FEE CALCULATION		<u> </u>		- <u></u>			
1. BASIC FILING, SEAF							
	FILING FE	EES S nall Entity		H FEES Small Entity	EXAMIN	ATION FEES Small Entity	
Application Type			ee (\$)	Fee (\$)	Fee (\$)		Fees Paid (\$)
Utility .	300	150 5	500	250	200	100	
Design	200	100 1	100	50	130	65	
Plant	200	100 3	300	150	160	80	
Reissue	300	150 5	500	250	600	300	
Provisional	200	100	0	. 0	0	0	
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues)					Fee (\$) 50	Small Entity Fee (\$) 25	
Each independent cla)			200	100
Multiple dependent c			,			360	180
Total Claims	Extra Claims		Fee P	aid (\$)			endent Claims
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HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)							
Other (e.g., late filing surcharge): 2254 Extension AND 2814 Statutory Disclaimer \$575.00							
SUBMITTED BY							
	ARP	eloguin En	Re	gistration No. omey/Agent) 50,7	787	Telephone	(206) 447-1336
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Name (Print/Type) Mark S. Peloquin, Esq. This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. OTPE TO 2 2006 TO THE TOTAL PROPERTY OF THE PR

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The following papers	were received in the United States Patent and Trademark Office:				
Applicant:	Marcus Andrew Stoodley	ļ			
Attorney:	Mark S. Peloquin, Esq.				
Title of Invention:	STORAGE AND ACCESS OF AGGREGATE PATIENT DATA FOR				
	ANALYSIS	ļ			
Serial No.:	10/648,650				
Filing Date:	August 25, 2003				
Docket No.:	11280.1002cip	1			
Express Mail No:	ER 164098742 US	I			
Mailing Date:	October 2, 2006				
(1) Transmi	ttal Form PTO/SB/21 (1 page)	l			
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	I Disclaimer PTO/SB/26 (1 page)	I			
	for Extension of Time Form PTO/SB/22 (1page)	ı			
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P.O. Box 1450		ĺ			
Alexandria VA					

Stephanie W. Roberts

Printed Name of Person Performing Mailing

10/02/06

Signature Date